

FORMS FOR BID

FOR CONSTRUCTION ON STATE HIGHWAY IN KERN COUNTY IN BAKERSFIELD ON ROUTE 99 AT AIRPORT DRIVE OVERCROSSING AND ON ROUTE 178 AT GOLDEN STATE AVENUE SEPARATION

In District 06 On Route 99, 178
Under

Notice to Bidders and Special Provisions dated July 25, 2016

Standard Specifications dated 2010

Project plans approved April 11, 2016

Standard Plans dated 2010

Applicable to

Electronic *Bid* book dated July 25, 2016 Identified by Contract No. 06-0K8104 06-Ker-99, 178-26.8, R2.0 Project ID 0612000108

Federal-Aid Project ACNHP-X029(125)E

DBE - COMMITMENT

DES-OE-0102.10D (REV 12/2014)

ADA Notice

CONTRACT NO:						
BID AMOUNT:						
\$						
BID OPENING DATE:						
BIDDER'S NAME:						
DBE GOAL FROM CONTR	ACT %:					
DBE PRIME CONTRACTO	R CERTIFICATION ¹ :	TOTAL NUMBER OF A	LL SUBCONTRACTS (DBE &	NON-DBE)	TOTAL VALUE OF ALL SUBCONTRA	CTS (DBE & NON-DBE)
BID ITEM NO.	SERVICES TO BE S	ID DESCRIPTION OF UBCONTRACTED OR D BE PROVIDED ²	WORK CATEGORY CODES ³	opened.	NAME OF DBEs st be certified on the date bids are include Caltrans' certification no., DBE s, and phone number. Show 2nd and lower tier subcontractors)	AMOUNT (\$)
Show all DBE firms being each DBE shown stating shown for the specific an	that it will be participat		written confirmation from erform the specific work		Total Claimed Participation	S
The names of the 1st tier			be consistent with the			%
Subcontractor List (Pub 0 Bach DBE prime contral performed by DBEs, incli	ctor must enter its certi	fication number and sh	now all work to be		er acknowledges that it is comm own on this form to meet the cor	itted to use the
² lf 100% of an item is not the item to be performed		nished by the DBE, de	scribe the exact portion of			
³ Use Work Category Cod	des from the California	Unified Certification Pr	ogram database.	Sig	gnature of Bidder	
				Da	te (A	rea Code) Tel. No.
				Pe	rson to Contact (Ple	ease Type or Print)

For individuals with sensory disabilities, this document is available in alternate formats. For information, call (916) 445-1233, TTY 711, or write to Records and Forms Management, 1120 N Street, MS-89, Sacramento, CA 95814.

DBE CONFIRMATION

DES-OE-0102.13 (NEW 05/2015)

Contract no.:			
Name of DBE business:			
Name of DBE representative	ž:		
DBE certification number:			
Name of bidder:			
Name of prime contractor if	different from the bidder:		
Name of representative of b	idder or prime contractor:		
Date:			
Bid item number	Item of work and description of services to be subcontract	cted or materials to be provided ¹	Amount (\$)
-			
418.1000			
portion of the item to be pe	be performed or furnished by the DBE, describe the exact rformed or furnished.	Total	
		enterprise, I confirm that my busin prime contractor shown above reg the bidder is awarded the contract	dder or prime contractor to perform
		I certify under penalty of perjury th	at the foregoing is true and correct.
		Signature of DBE's authorized	representative:
		Printed name of DBE's author	ized representative:
		Title of DBE's authorized repre	esentative:
		Date:	

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STATE OF CALIFORNIA • DEPARTMENT	OF TRANSPORTATION
STATE OF CALIFORNIA • DEPARTIMENT	OF IRANSPORTATION

DBE GOOD FAITH EFFORTS DOCUMENTATION

DES-OE-0102.11A (REV 12/2014)

Bidder's Name:	
Contract No.: _	

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List items of work the Bidder made available to DBE firms. Identify items of work the Bidder might otherwise perform with its own forces, items that have been broken down into economically feasible units to facilitate DBE participation, and items for which the Bidder has established flexible time frames for performance and delivery schedules in a manner that encourages and facilitates DBE participation. For each item listed, show the dollar value and percentage of the total contract. The Bidder must demonstrate that sufficient work to meet the goal was made available to DBE firms.

Item of Work Offered, Services Offered, or Materials Supplied	Perfori	Normally ns Item s/No	Facilitate I	en Down to Participation s/No	for Performan Scho	xible Timeframes ce and Delivery edules s/No	Amount (\$)	Percentage of Total Bid
	YES	Пио	YES	Пио	YES	□ NO		
	YES	□ №	YES	□ NO	YES	□ NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□NO		
	YES	□ №	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	□ №	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	NO	YES	Пио	YES	□ NO		
	YES	Пио	YES	□ NO	YES	□ NO		
	YES	NO	YES	Пио	YES	□ NO		

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DES OF 0102 11 A (BEV/ 12/2014)

Bidder's Name	21	
Contract No.:		

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					clude the items of work offered a copies of solicitations. e-mail me			
Name of DB	E Solicited	Date of Ir	nitial Solicitation	ltems of	Wark Offered	Follow Up Me	Follow Up Methods and Dates	
DBE, the DBEs that prov	vided quotes, the	price quote for e		ifference for each DBE	pecific to the items of work being iff the selected firm is not a DBE act.			
Items of Work	Specifications f	od Plans/ for Work Offered s/No	Name of Selected Firm	DBE or Non-DBE	Name of Rejected Firm	Quote (\$)	Price Difference (\$)	
	YES	□ NO						
	YES	□ NO						
	YES	ОИ						
	YES	□ NO						
	YES	Пио						
	YES	Пио						
	YES	ОИ						
	YES	ОИ						
f the first palested for th	YES	NO						

DBE GOOD FAITH EFFORTS DOCUMENTATION

Bidder's Name	
Contract No.: _	

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4. Describe the Bidder's outreach efforts to identify and solicit the interest of all certified DBEs that have the capability to perform the work of the Contract. Provide copies of supporting documents.							
Description of Outreach	Dates	Location (if applicable)	Results				
	de interested DBEs with adequate information a assisted, the type of information provided, and						
Describe the Bidder's efforts made to assist dates. Provide copies of supporting document	t interested DBEs in obtaining bonding, lines of s.	credit, or insurance. Identify the DBEs assisted	d, the type of assistance offered, and the				
equipment the DBE purchases or leases from documents. List efforts made to assist interest	t interested DBEs in obtaining necessary equipt the prime contractor or its affiliate. Identify the sed DBEs in obtaining bonding, lines of credit, in obcontractor purchases or leases from the prime	DBEs assisted, the type of assistance offered, nsurance, necessary equipment, supplies, mat	and the dates. Provide copies of supporting erials, or related assistance or services.				
List the names of agencies and the dates or provide copies of supporting documents.	n which they were contacted to provide assista	nce in contacting, recruiting, and using DBE fir	ms. If the agencies were contacted in writing,				
9. Include additional data to support a demons	tration of good faith efforts.						
NOTE: USE ADDITIONAL SHEETS OF PAPE	ER IF NECESSARY.						

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